

Safety and Health Services Division

FY07 OSH Objectives

Final; Revision 1: 04/26/07

Approved By:	P. Williams <i>[signature on file]</i>	Date 04/26/07	SHSD Manager, ESH&Q Directorate OSH Representative
Approved By:	R. Selvey <i>[signature on file]</i>	Date 04/26/07	SHSD OSH 18001 Point of Contact

Objective	Assigned to:	Delivery Date:
Objective 1: Improve <u>document & record control</u> in SHSD operations and facilities. Initiating event: The Phase 3 NSF Registration audit found issues in SHSD and other organizations where forms in use for OSH data that did not have appropriate document control in place. Earlier internal and external OHSAS 18001 audits of other organizations had indicated implementation of document control and record management is a site wide issue. SHSD needs to verify compliance and correct non-conformances if they exist. This objective is part of the internal monitoring and measuring aspect of OHSAS. Considerations: Legal and other Requirements will be better controlled. Potential OHSAS 18001 non-conformances will be eliminated.		
Target 1.1: Review the SE Group's Standard Operating Procedure and update any data forms that do not have the appropriate revision tracking numbers and/or dates. Ensure that 100% of SOPS and forms comply with document control requirements.	S. Kane	05/30/07
Target 1.2: Review the IH Group's Standard Operating Procedure and update any data forms that do not have the appropriate revision tracking numbers and/or dates. Ensure that 100% of SOPS and forms comply with document control requirements.	R. Selvey	05/30/07
Target 1.3: Conduct a review of record management in SE group and correct instances where records are not filed in secure and retrievable location within the documented retention schedule. Ensure that 100% of official records in the possession of SE comply with records management requirements.	R. Selvey	05/30/07
Target 1.4: Conduct a review of record management in IH group and correct instances where records are not filed in secure and retrievable location within the documented retention schedule. Ensure that 100% of official records in the possession of IH comply with records management requirements.	R. Selvey	05/30/07
Target 1.5: Conduct a review of record management in SHSD division level documents and correct instances where records are not filed in secure and retrievable location within the documented retention schedule. Ensure that 100% of official records in the possession of HP comply with records management requirements.	S. Wiley	05/30/07
Objective 2: Improve the <u>requirement management</u> process in SHSD areas of expertise and responsibility. Initiating event: Phase 3 NSF Registration audit found issues in SHSD requirement management for noise and hearing conservation. Other IH issues were found on further self-inspection. Considerations: Legal and other Requirements tracking that SHSD provides to BNL in the SBMS program will be improved.		
Target 2.1: Conduct a requirement management review on 100% of SE program areas that have requirements in FY07.	S. Kane	06/30/07
Target 2.2: Conduct a requirement management review on 100% of IH program areas that have requirements in FY07.	R. Selvey	06/30/07
Objective 3: Improve the performance of SHSD professional in completing actions and commitments assigned in ATS.		

Objective		Assigned to:	Delivery Date:
Initiating event: Less than adequate performance in FY06 by SHSD with negative comments from an Interested Party, i.e. DOE.			
Considerations: Views of Interested Parties, our contact owner- DOE, will be addressed.			
	Target 3.1: Reduce the number of SE Corporate ATS actions extended by 75%.	S. Kane	09/30/07
	Target 3.2: Reduce the number of IH Corporate ATS actions extended by 75%.	R. Selvey	09/30/07
	Target 3.3 Reduce the number of HP Corporate ATS actions extended by 75%.	P. Williams	09/30/07
	Target 3.4: Reduce the number of SE Family ATS actions extended or late by 50%.	S. Kane	09/30/07
	Target 3.5: Reduce the number of IH Family ATS actions extended or late by 50%.	R. Selvey	09/30/07
	Target 3.6 Reduce the number of HP Family ATS actions extended or late by 50%.	P. Williams	09/30/07
Objective 4: Improve operational controls on the HEPA Filter Testing where the JRA that indicated an unacceptable risk in some buildings and operations were halted in those areas.			
Initiating event: FY06 Job Risk Assessment JRA-SHSD-01 team discussion and risk assessment.			
Considerations: OSH Hazards and Risks will be reduced; Technological Options- tools and PPE will be implemented as needed.			
	Target 4.1: Conduct a fall protection analysis of access to HEPA filter banks on the roof of Building 830 and other buildings' roof access necessary for HEPA testing.	S. Kane	06/30/07
	Target 4.2: Act on the fall protection analysis to implement recommendations where financially practical so that testing can be resumed.	R. Selvey	09/30/07

Considerations in setting these Objectives:	Output needs to be:
Legal and other Requirements OSH Hazards and Risks Technological Options Financial, operational and business requirements Views of Interested Parties	Consistent with BNL ESSH policy Ensure Continual Improvement Support BNL Site Level Improvement Objectives

Tracking: The Objectives will be tracked in Family ATS by the SHSD OSH POC and the status reported in the periodic SHSD Self Assessment Plan meetings held by the SHSD Manager.

Revision 1: Added missing Target 1.3 for SE to conduct record management review. Corrected numbering error for Target now numbered 1.5. Corrected numbering error for Objective and Targets now numbered 4.